


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000028576 1. Entity Name WIEBAT, LLC	
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Principal Place of Business 2603 S.E. 17TH STREET, SUITE A OCALA, FL 34471	Mailing Address 2603 S.E. 17TH STREET, SUITE A OCALA, FL 34471
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01152007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent WEICHENS, CHRISTOPHER S 2603 S.E. 17TH STREET, SUITE A OCALA, FL 34471

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WIECHENS, CHRISTOPHER S 2603 S.E. 17TH STREET, SUITE A OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BATSEL, ROBERT P.O. BOX 2530 OCALA, FL 34478
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01/26/07-80033-013 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  Christopher S. Wiechens 1/22/07 352-682-3214
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #